Proposed Standard Cost Sharing Plan

| High Value Silver Plan 94% Actuarial Value Plan | | | | |
|--|-------------------------|------------------------|-------------|-------------|
| Overall Deductible | | | | \$175 |
| Service Specific Deductibles | | | | |
| | | | Medical | \$0 |
| | | | Brand Drugs | \$0 |
| | | | Dental | \$0 |
| Member Out of Pocket Maximum (all services comb | oined – does not includ | e deductible) | | \$600 |
| | Subject to | | | |
| General Service Description | Deductible | Unit of Service | Copays | Coinsurance |
| Behavioral Health - IP | Yes | Admission | \$50 | 100% |
| Behavioral Health - OP | Yes | Visit | \$0 | 100% |
| Behavioral Health - Professional | No | Visit | \$0 | 100% |
| Durable Medical Equipment | Yes | Service | \$0 | 100% |
| Emergency Room Services | Yes | Visit | \$0 | 100% |
| Imaging (CT/PET Scans, MRIs) | No | Visit | \$25 | 100% |
| Hospital Inpatient | Yes | Admission | \$50 | 100% |
| Lab and Radiology | No | Visit | \$0 | 100% |
| Skilled Nursing Facility | Yes | Admission | \$0 | 100% |
| Other | Yes | Visit | \$0 | 100% |
| Other Medical Professionals | No | Visit | \$8 | 100% |
| Hospital Outpatient Facility | Yes | Visit | \$0 | 100% |
| Primary Care Physician | No | Visit | \$0 | 100% |
| Specialty Physician | No | Visit | \$8 | 100% |
| Pharmacy - Generics | No | Prescription | \$2 | 100% |
| Pharmacy - Preferred Brand Drugs | No | Prescription | \$6 | 100% |
| Pharmacy - Non-Preferred Brand Drugs | No | Prescription | \$6 | 100% |
| Pharmacy - Specialty Drugs | No | Prescription | \$6 | 100% |
| AV Calculator Result | | | | 95.0% |
| True Actuarial Value | | | | 96.8% |